

# Exhibit 15

**PROJECT OHR, INC.**  
**80 Maiden Lane – 10<sup>th</sup> floor**  
**New York, New York 10038**  
**(718) 853-2700 or (212) 497-5053**

## **CLIENT HANDBOOK**

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If you have any questions or problems regarding home attendant care, please contact your Personnel Specialist during business hours at (718) 853-2700.

When the office is closed, Project OHR has an answering service to take your calls and respond to emergencies. We can dispatch a replacement home attendant 7 days per week and 24 hours of the day. Please call the same number, (718) 853-2700 for emergencies.

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Project OHR has been selected by the Human Resources Administration (HRA) of the City of New York to provide you with home attendant care. Incorporated in November 1979, Project OHR seeks to provide reliable, high quality home attendant care. Project OHR clients, referred by HRA, a) are Medicaid eligible, b) reside in Brooklyn and c) require assistance with the activities of daily living.

The primary goal of our service is to permit the elderly and disabled client to remain independent in their home environment, preventing, whenever possible, unnecessary and costly institutionalization.

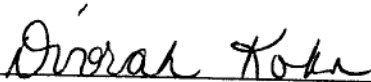
This handbook has been developed to familiarize you with

- a) our company's policies and procedures
- b) your responsibilities as a Project OHR client
- c) the duties of the home attendant assigned to assist you.


Please read this CLIENT HANDBOOK carefully and save it for reference.

For home care to be successful, all participants in the process: client, family, agency and attendant, must come together in a spirit of openness and cooperation. Through open communications between parties, Project OHR is able to provide the appropriate level of care to the elderly and/or disabled client.

If you have any questions regarding this handbook, please feel free to contact your Personnel Specialist.



D'vorah Kohn  
Executive Director



Rachel Klein  
Associate Director

This program is funded under an agreement with the  
Human Resources Administration of the City of New York.

### HOME ATTENDANT EMPLOYMENT STATUS

The home attendant is an employee of Project OHR. He/she is not employed by the client. The attendant's salary is paid by Project OHR with funds received through the Medicaid Program. The attendant is required to adhere to the rules and regulations set by this agency.

### HOME ATTENDANT ASSIGNMENTS

Home attendant employees are assigned to Project OHR clients by Project OHR Placement Coordinators. Placement is based on, but not limited to, the following:

- 1) attendant employment seniority/availability
- 2) attendant skill level/job knowledge
- 3) specific client cultural/linguistic requirements
- 4) client personal preferences
- 5) hours/day per assignment
- 6) physical/emotional condition of client
- 7) geographic area of client

Clients may only refer individuals to be home attendants for themselves if Project OHR does not have a home attendant with a specific skill level (e.g. language). If Project OHR has home attendants available to meet a client's needs, Project OHR will not hire the referred individual.

With few exceptions, Project OHR does not permit home attendant employees from working for the same client for seven days per week. Additionally, as a general rule, 4-5 hours per day of care commence at 8 or 9AM or 12 Noon to 2PM. In order to permit attendants to work a full day, clients receiving low hours of care per day may be required to accept care in the afternoon.

### HOME ATTENDANT JOB RESPONSIBILITIES

Home attendant duties are divided into two (2) categories:

Personal Care Services include assisting a client with walking, bathing, dressing, personal grooming, meal preparation, feeding, and toileting

Housekeeping Chores include tasks that involve keeping a clients' household clean, safe and sanitary, as well as shopping, errands, escort and personal laundry.

Regarding housekeeping chores, clients are responsible to show



attendants were supplies are stored and how to use them.

Problems often arise regarding the extent of housekeeping chores to be performed by the home attendant. Home attendant care has been authorized based on the primary need for personal care services as detailed above. Home attendants are neither required nor permitted to perform heavy duty cleaning tasks such as a) washing of windows/blinds b) moving furniture c) waxing of floors. Additionally, attendants are not required to do laundry by hand.

HRA has set defined limits as to the number of hours a home attendant may dedicate to housekeeping chores. Additionally, HRA has set limits as well to the amount of time an attendant may spend ambulating with his/her client outside of the home.

CLIENTS WHOSE NEEDS PRIMARILY APPEAR TO BE OF A HOUSEKEEPING NATURE WILL BE REFERRED BY PROJECT OHR TO ONE OF HRA'S HOUSEKEEPING VENDOR AGENCIES.

#### UNIVERSAL PRECAUTIONS

The Occupational Safety and Health Administration (OSHA), a federal agency, has determined that Home Attendants must use **universal precautions** when caring for all clients. Universal precautions, in its simplest form, requires home attendants to treat all blood and body fluids as potentially infectious; to be handled with protective gear such as gloves, masks/eye guards in case of splashing, and proper disposal of soiled linens and sharps.

As part of the pre-employment orientation and at every in-service training session, Project OHR's Nursing staff will review universal precaution guidelines with home attendant employees.

Project OHR requires all of its home attendant personnel to use **universal precautions in the work place**. Home attendants are required to contact their assigned client's Nursing Care Coordinator at Project OHR if a) protective gear is not available for their use in a client's home and b) in the event of an exposure to blood and/or body fluids.

#### DUTY FREE HOUR

Home attendant service which is more than four hours a day often includes a duty free hour. A duty free hour is, essentially, a lunch hour for the assigned attendant and it must be taken in the middle of the workday, between 12 noon and 2PM.

NY Times 12.30.2008

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80 Maiden Lane – 10<sup>th</sup> Floor  
New York, New York 10038  
(212) 497 – 5053

*"How Health Aides:  
What they make,  
what they cost."  
(The New York  
Age)*

## CLIENT HANDBOOK

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When the office is closed, Project OHR has an answering service to take your calls and respond to emergencies. Please call the same number, (212) 497 – 5053 for emergencies.

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The primary goal of our service is to permit the elderly and/or disabled to remain independent in their home environment, preventing whenever possible, unnecessary and costly institutionalization.

This handbook has been developed to familiarize you with:

- a) our company's policies and procedures
- b) your responsibilities as a Project OHR client and
- c) the duties of the home attendant assigned to assist you.

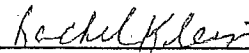
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## BACKGROUND INFORMATION

Project OHR is a not-for-profit home attendant vendor agency under contract with the Human Resources Administration (HRA) of the City of New York – Home Care Services Program (HCSP). All funds for home attendant care are received through the Medicaid program. There are over 60 vendor agencies providing home attendant services to the elderly, frail and disabled populations throughout the five boroughs of New York City.

## MEDICAID ELIGIBILITY

Prior to commencement of home care, Project OHR clients are approved for participation in the Medicaid program by local CASA (Community Alternative Systems Agency) offices, the division of HRA that certifies individuals for participation in the Medicaid program. Not all Medicaid clients receive home care. Project OHR clients have been approved for both Medicaid and for home attendant services.

All of Project OHR's clients must maintain Medicaid eligibility in order to continue to receive home attendant care. If coverage lapses, or a client is found to be no longer eligible, CASA will instruct OHR to terminate services. Therefore, IT IS EXTREMELY IMPORTANT THAT ALL CLIENTS PROMPTLY SUBMIT APPROPRIATE DOCUMENTATION TO THE CASA OFFICE OR CASE WORKER AT THE TIME OF MEDICAID RECERTIFICATION.

Any questions regarding Medicaid should be addressed to the client's CASA Case Manager.

## SERVICE AUTHORIZATION

Prior to case referral to Project OHR, clients have been visited and assessed by a CASA case worker and visiting nurse. The CASA staff is responsible for a) initial and ongoing determination of Medicaid eligibility and b) authorization of service hours.

Project OHR's Nursing Care Coordinators can suggest changes in service plans. However, it is the responsibility of the CASA staff to determine and authorize client service hours.

## INITIATION OF HOME ATTENDANT SERVICE

Prior to the actual start of service, Project OHR has received a formal referral from the CASA office. This referral includes: a) total hours and days of service,

b) length of time for which service has been authorized, c) summary of client's physical condition, medical diagnosis and history, and d) surplus income, if applicable. When OHR staff receives the referral from the CASA office, contact is made with the prospective client to arrange for an initial assessment visit.

A Project OHR Nursing Care Coordinator and Personnel Specialist visit each client in his/her home. They complete an independent assessment of client need for home care and whether home care service is appropriate for the client. Our assessment team will ask questions regarding condition, need for assistance, medication, family supports, etc. All of this information is crucial to our agency's ability to provide care.

The Project OHR staff will inform the prospective client of the hours and days of service that CASA has authorized, explain the duties and functions of an attendant and attempt to address any concerns and questions clients have regarding our service.

#### CLIENT REFERRAL OF CARE PROVIDERS

With few exceptions, Project OHR will secure and place a qualified home attendant from over 1600 attendants we employ. In the rare situation where OHR will hire a client-referred attendant, the hiring process will take several weeks. This will delay the start of service. Project OHR will, therefore, start service with a different home attendant, pending the hiring of the attendant referred by the client. Home attendants referred to Project OHR must meet our selection criteria and we retain the right, as employer, to disqualify those potential employees we deem unfit or inappropriate for employment.

Project OHR will only hire attendants referred by clients with specific needs, i.e. language, job skills, etc. If Project OHR already employs home attendants who are able to care for the client, we will not register or process a client referred attendant.

IT IS EXTREMELY IMPORTANT THAT HOME CARE SERVICES BEGIN WITHIN 30 DAYS OF THE REFERRAL BY THE CASA OFFICE. ALL MEDICAL DOCUMENTATION EXPIRES AFTER THAT PERIOD AND A CLIENT MAY HAVE TO RE-APPLY FOR SERVICES AFTER THE 30 DAYS ELAPSE.

#### DISAGREEMENT OVER SERVICE SCHEDULES

If a client disagrees with the number of hours of home care service as authorized by CASA, the client must apply to the Human Resources Administration for a fair hearing.

It is the recommendation of Project OHR staff to commence service with less hours and request a re-assessment from the CASA staff, unless less hours would place the client at serious physical risk.

### SURPLUS INCOME

Some clients, by virtue of income and resources (savings, etc.) do not completely meet the eligibility standards for Medicaid. However, because of the need for home care and/or high medical costs, they are eligible for services through the SURPLUS INCOME PROGRAM. Under this program, individuals can obtain Medicaid services by paying the amount of their monthly income above the Medicaid maximum limit toward that service, thereby making themselves eligible for Medicaid.

The amount of surplus income is determined at the time of the application for Medicaid eligibility. As part of the notification process, clients are informed in writing of the exact amount of the monthly surplus obligation. If a client disagrees with that amount, he/she has the right to contest the determination through a fair hearing process, detailed in the Medicaid Letter of Acceptance.

At the time of client referral for home attendant care, the CASA staff has already informed Project OHR staff of the amount of the monthly surplus obligation.

**PROJECT OHR DOES NOT DETERMINE A CLIENT'S SURPLUS AMOUNT. HOWEVER, WE ARE REQUIRED BY CONTRACT WITH HRA TO COLLECT IT FROM THOSE CLIENTS WHO OWE IT.**

Payment of monthly surplus income to Project OHR is not designated solely for home attendant services, but maintains client eligibility for all Medicaid services. Clients are obligated to pay the monthly surplus even if, for some reason, they have not had the usual number of home attendant visits during a particular month due to client hospitalization, vacation, etc.

Project OHR will mail out monthly bills to our Surplus Income clients at the beginning of each month for the up coming month. The bill will list the current amount owed plus any arrearages from past months. Payment is due upon receipt of the bill and must be made by personal check or money order. Cash payments are not accepted. The monthly payment should be returned by mail in the pre-stamped envelope provided by Project OHR.

**PRIOR TO COMMENCEMENT OF HOME ATTENDANT CARE, PROJECT OHR WILL REQUIRE THAT A CLIENT OR NEXT-OF-KIN SIGN A CONTRACTUAL AGREEMENT OBLIGATING HIM/HER TO PAY MONTHLY SURPLUS INCOME.**

**FAILURE TO PAY SURPLUS MAY RESULT IN DISCONTINUATION OF CLIENT PARTICIPATION IN THE MEDICAID PROGRAM.**

### CLIENT CARE PLAN

During the initial visit to a client's home, a Project OHR Nursing Care Coordinator drafts a "CLIENT CARE PLAN". The Care Plan details a client's physical limitations and the type of routine personal assistance required. The Care Plan has three copies, one of which is placed in an accessible place in the client's home. In this way, both the client and all future home attendants can refer to it. The two other copies are filed in the client's chart at Project OHR and its contents are shared with permanently placed home attendants prior to the start of the assignment.

The Project OHR Nursing Care Coordinator will update this Care Plan bi-yearly, or more often if indicated by any change in client condition.

### PROVISION OF SERVICE AND TEMPORARY SUSPENSIONS

According to the Human Resources Administration regulations, Project OHR can provide home attendant care to a client **only** in his/her official place of residence.

If a client leaves his/her home for twenty four hours or more, the client and/or client next-of-kin are required to notify Project OHR immediately and service will be temporarily suspended.

Service will be temporarily suspended when the client is at any one of the following locations:

1. outside of a client's home (including a relative's home)
2. summer or vacation home
3. hospital, nursing home or rehabilitation center

It is the responsibility of the client and/or the client's family to notify Project OHR's Personnel Specialist if any of the above situations occur. Clients should not leave this responsibility to the assigned home attendant.

To reinstate service after a temporary suspension, up to a maximum of thirty days, the client is responsible to contact his/her assigned Personnel Specialist. The Personnel Specialist will then inform the attendant to return to work.

IF A CLIENT MAKES ARRANGEMENTS WITH HIS/HER FORMERLY ASSIGNED HOME ATTENDANT TO RETURN TO WORK WITHOUT INFORMING PROJECT OHR AFTER SERVICE HAS BEEN SUSPENDED, THE CLIENT WILL BE RESPONSIBLE FOR PAYMENT OF WAGES TO THE HOME ATTENDANT. PROJECT OHR WILL BE UNABLE TO PAY THE HOME ATTENDANT AS SERVICE WAS OFFICIALLY SUSPENDED.

### CLIENT HOSPITALIZATION

If a client is hospitalized, for any reason and regardless of the length of admission, the client and/or next-of-kin must notify Project OHR immediately.

HOME ATTENDANTS CANNOT WORK FOR CLIENTS WHILE THEY ARE HOSPITALIZED. MEDICAID WILL NOT PAY FOR HOSPITAL CARE AND HOME CARE ON THE SAME DAY.

During the period of client hospitalization, OHR will offer temporary home care assignment's to the client's regular attendant. Upon discharge, the client may request to have his/her former home attendant reinstated.

Upon client notification of the discharge date, it is imperative that the client inform the hospital social worker or discharge planner that he/she was receiving home attendant services through Project OHR. It will be the responsibility of the hospital social worker to contact OHR to arrange for service reinstatement upon discharge.

If a client's hours of service and/or physical condition has changed during the period of hospitalization, the assigned Project OHR Nursing Care Coordinator will visit the client in the hospital prior to discharge to assure that: a) home attendant care remains an appropriate alternative for the client, and b) the authorized service hours will be sufficient to maintain the client at home.

Each year the Human Resources Administration conducts a computerized audit matching hospital bills and home care bills. The purpose of the audit is to assure that the City does not pay home care and hospital bills on the same dates. The City requires OHR to repay all home care bills for days that clients were hospitalized. Upon receipt of this audit, Project OHR: a) terminates the employment of any home attendant who received wages while his/her client was hospitalized, and b) submits client names to the HRA Bureau of Client Fraud Investigation.

### CASE CLOSURE

In the event that a client has not received home attendant service for a period of more than thirty days, whether due to hospitalization, vacation, etc., Project OHR is required to contact the CASA office to officially close the case. After a client's case is closed and he/she wishes to have services reinstated, the client will be required to have his/her physician complete a new Physician's Evaluation Form (M11Q) and submit it to his/her CASA case manager. Once a case is officially closed, it is the responsibility of the CASA office to reauthorize services.



If a client has his/her formerly assigned attendant provide care after the case has been officially closed by CASA staff, Project OHR will not be able to pay the attendant.

#### INCREASE AND/OR DECREASE IN SERVICE HOURS

##### A) Decrease:

If a client determines that the hours or days of authorized service are more than he/she requires, the client must contact his/her Personnel Specialist. The client will be required to submit a letter to Project OHR stating that he/she can function with fewer hours. If Project OHR's Nursing Care Coordinator is in agreement with the client that he/she can function with less hours of care, service will be reduced and a copy of the client's letter will be forwarded to the CASA case worker.

##### B) Increase:

If a client believes that the authorized hours of home attendant care are insufficient to meet his/her needs, the client will be required to discuss the situation with both the Project OHR Nursing Care Coordinator and the CASA case manager.

In order to process a request for increased hours, a client will need to have his/her physician complete a new M11Q form. The new M11Q form must detail the necessity for increased hours of service.

It is the sole responsibility of the CASA case manager to process the request for increased hours of service. **Project OHR does not determine these hours.** If the Project OHR Nursing Care Coordinator agrees that a client would benefit from increased hours, she will, as a client advocate, submit her Nursing Assessment to the CASA case manager in support of the request.

If the increase in authorized hours of care is approved, the CASA office will contact Project OHR with the change. The client will be notified by telephone by Project OHR's Personnel Specialist of the start date of the increased hours of care.

##### C) Emergency Increase:

In the event of acute changes in a client's medical condition, CASA staff can implement emergency increases in hours of home care service for a period of five days. The Project OHR Nursing Care Coordinator will assist the clients in securing emergency increases in service hours. The CASA case manager will require a new M11Q to be completed by the client's physician.



## CLIENT BILL OF RIGHTS

Your health, safety and well being are the main concern for the dedicated professionals and para-professionals who care for you in your home. As our client, you have certain rights that are important for you to understand. Your nurse will review these with you.

### **AS A CLIENT OF PROJECT OHR, YOU HAVE THE RIGHT TO:**

- receive services without regard to race, creed, color, sex, age, or disability.
- be treated with dignity, consideration and respect, including privacy.
- have your property treated with respect.
- have your medical records kept confidential to the maximum extent provided by law.
- know what goods and services are available, how much they will cost, and how payment will be handled.
- be fully aware of your medical condition.
- be informed about all care and treatments prescribed, any changes in your care plan, or changes in information, as soon as possible.
- to have communication needs met in a form or language understandable to you.
- participate in your care and in planning your care (this includes discharge planning).
- be educated about your plan of care and informed about continuing care.
- have access to a professional twenty four hours a day, seven days a week.
- refuse treatment/care after learning all the facts.
- be referred to another agency.
- know the names and the responsibilities of the people giving care to you.
- be free from abuse or exploitation of any kind.

- know how to make a complaint or recommend changes in agency policy and services without effect on care or service, and have Project OHR investigate such complaints.

If a client lacks capacity to exercise these rights, the rights shall be exercised by an individual, guardian, or entity legally authorized to represent the client.

#### WORKING WITH THE HOME ATTENDANT EMPLOYEE

Project OHR home attendants and clients come from a variety of different racial, ethnic, religious, social, economic and linguistic backgrounds. For home care to be successful, all parties including the client, client family, home attendant and Project OHR staff must work together. Client and client family members are urged to be understanding of home attendant personnel and try to make the "match" between home attendant and client as mutually beneficial as possible.

#### THE HOME ATTENDANT

Home attendant employees are thoroughly screened by Project OHR's Personnel Department prior to hire. The screening process includes verification of the following:

- 1) employee application
- 2) written employment and/or character references
- 3) home attendant certification from a New York State approved home attendant training program
- 4) complete pre-employment physical examination, including drug screen
- 5) legal documents permitting work in the United States
- 6) criminal history background check (fingerprinting)

In addition, the attendant is screened by the Personnel Manager regarding the following:

- 1) ability to communicate in English
- 2) attitude
- 3) understanding of the needs of the elderly/disabled
- 4) skill level/job knowledge
- 5) judgment
- 6) employment history
- 7) non-relative of assigned client

After the home attendant has passed the initial screening, he/she receives a complete Employee Orientation. This includes a review of Project OHR's Personnel Policies and Practices for Home Attendant employees which details company rules and regulations, as well as client needs and limitations.

Home attendant personnel receive pre-employment and yearly physical examinations which include a drug screen for controlled substances. The examinations are scheduled and paid for by Project OHR. Additionally, attendants are required to attend a three hour in-service education class twice per year, which is conducted by Nursing Care Coordinators. The courses are designed to up-date attendant skill level and job knowledge. Project OHR Personnel Specialists will provide clients with a replacement attendant, if requested, on the day of a scheduled physical exam or in-service training class. Home attendants are notified in advance, by mail and telephone, of both physical and in-service training dates.

#### EMPLOYEE PHOTO IDENTIFICATION

All Project OHR home attendants, as well as administrative staff, are issued a photo identification card prior to commencement of employment. Home attendants are instructed to carry or wear the ID when they work. If a new home attendant or replacement attendant is assigned, the client should request to see the validated ID card prior to allowing the person into the home.

#### HOME ATTENDANT EMPLOYMENT STATUS

**The home attendant is an employee of Project OHR.** He/she is not employed by the client. The attendant's salary is paid by Project OHR with funds received through the Medicaid program. The attendant is required to adhere to the rules and regulations set by this agency.

#### HOME ATTENDANT ASSIGNMENTS

Home attendant employees are assigned to Project OHR clients by Project OHR **Placement Coordinators**. Placement is based on, but not limited to, the following:

- 1) attendant employment seniority/availability
- 2) attendant skill level/job knowledge
- 3) specific client cultural/linguistic requirements
- 4) hours per day of assignment
- 5) physical and emotional condition of client
- 6) geographic area of client

Project OHR **does not** permit home attendant employees to work for the same client for seven days per week. Additionally, as a general rule, care commences at 8 or 9 am for morning service, or 1 or 2 pm for afternoon service. In order to permit attendants to work a full day, clients receiving low hours of care per day may be required to accept service in the afternoon.

## HOME ATTENDANT JOB RESPONSIBILITIES

Home attendant duties are divided into two categories:

**Personal Care Services** include assisting a client with walking, bathing, dressing, personal grooming, meal preparation, feeding and toileting.

**Housekeeping chores** include tasks that involve keeping a client's household clean, safe and sanitary, as well as shopping, errands, escort and personal laundry.

Clients are responsible for showing home attendants where housekeeping supplies are stored, and how to use them.

Problems often arise regarding the extent of housekeeping chores to be performed by the home attendant. Home attendant care has been authorized based on the primary need for personal care services as detailed above. Home attendants are neither required nor permitted to perform heavy duty cleaning tasks such as: a) washing windows or blinds, b) moving furniture, c) waxing floors. Additionally, attendants are not required to do laundry by hand.

HRA has set defined limits as to the number of hours a home attendant may dedicate to housekeeping chores. Additionally, HRA has set limits to the amount of time an attendant may spend ambulating with his/her client outside the home.

**Clients whose needs primarily appear to be of a housekeeping nature will be referred to CASA for transfer to one of HRA's housekeeping vendor agencies.**

## STANDARD PRECAUTIONS

The Occupational Safety and Health Administration (OSHA), a federal agency, has determined that home attendants must use standard precautions when caring for all clients. Standard precautions requires home attendants to treat all blood and body fluids as potentially infectious. Blood and body fluids must be handled with protective gear such as gloves, masks, or eye guards in case of splashing. Proper disposal of soiled linens and sharps is required.

As part of the pre-employment orientation and at every in-service training session, Project OHR's nursing staff will review standard precaution guidelines with home attendant employees.

## DUTY FREE HOUR

Home attendant service which is more than four hours a day often includes a duty free hour. A duty free hour is a lunch hour for the assigned attendant. It

must be taken in the middle of the work day, either from 12 – 1 pm, or from 1 - 2 pm. **The home attendant is not permitted to take the duty free hour at the beginning or the end of the day.**

The duty free hour is personal time for the home attendant. Clients should not require the attendant to perform any tasks during this break. The attendant, if he/she so desires, can use this time to leave the client's home and take care of personal business. The duty free hour is just that – one hour.

Split shift and sleep-in cases do not have duty free hours.

### ATTENDANT ABUSE

Just as a home attendant is certainly not permitted to physically or emotionally abuse an elderly, frail or disabled client, so too, a client and/or client family member is not permitted, in any manner, to abuse a Project OHR home attendant employee. Abuse, such as:

- 1) physical abuse
- 2) emotional abuse
- 3) verbal abuse/obscene language
- 4) sexual abuse
- 5) racial slurs
- 6) inappropriate and/or excessive cleaning
- 7) excessive shopping and/or errands
- 8) providing care for non-authorized clients
- 9) threatening home attendant with loss of employment

will not be tolerated! In cases of client inflicted abuse against home attendant employees, a case conference will be held with the client, client family members, Project OHR and CASA staff at the home of the client.

**Documented abuse may lead to suspension  
and/or termination of home attendant service.**

### MUTUAL CLIENTS

In a household with more than one individual, the home attendant is responsible to care **ONLY** for the individual client who has been authorized for service by CASA. If the case is a **MUTUAL** case, two people have jointly been authorized to receive home attendant care.

**The home attendant is NOT permitted to perform tasks for individuals residing in a client's household who are not authorized for care.**

## LIMITATIONS OF HOME ATTENDANT CARE

Home attendants are not permitted, trained or licensed to perform any medically related task.

Attendants performing medically related tasks place the client at medical risk.

Medically related tasks include:

- |                                 |                             |
|---------------------------------|-----------------------------|
| 1) medication administration    | 6) nasogastric tube feeding |
| 2) catheter / ostomy irrigation | 7) insulin injections       |
| 3) inhalation / oxygen therapy  | 8) enema administration     |
| 4) suctioning                   | 9) eye drops                |
| 5) ulcer / wound care           | 10) nail cutting            |

Prior to case acceptance, Project OHR requires responsible family members to sign a Medical Release acknowledging the responsibility for any and all medically related tasks.

Project OHR will require family members to pre-pour medications at least once per week for those clients who are not self medicating. Project OHR's Nursing Care Coordinator may be able to assist the client and family by making a referral to a Certified Home Health Agency (CHHA) for wound care, injections and other skilled tasks. CHHA services may be able to provide a visiting nurse to perform skilled tasks that home attendants are neither competent nor permitted to perform.

## PERSONAL EMERGENCY RESPONSE SYSTEM (PERS)

In order to maintain the safety of the client after service hours, many clients are currently being authorized by the Human Resources Administration to receive a Personal Emergency Response System (PERS). AMAC, the company providing the PERS device, will provide the client with a necklace with a trigger which, when pressed, will automatically connect to a twenty four hour per day, seven day per week service. AMAC, which has all the client's vital information on computer file, will assist the client in case of accidents in the home or medical emergencies when a home attendant is not present. They will contact emergency care, client relatives, neighbors, etc., depending on the situation. In addition to the necklace, the client will have a buzzer mounted on the wall in the bathroom, a silent alarm at the door in case of intruders, and a sensitive fire alarm installed.



### NURSING CARE COORDINATORS

The Project OHR Nursing Care Coordinator will visit each client four times per year. On each visit, he/she will assess the client's current condition and status and evaluate the home attendant's work performance. The nurse may also instruct the attendant in any particular task that a client may require. The nurse will assess the appropriateness of the current level of care. The nurse is not required to telephone the client in advance of the visit. Nursing Care Coordinators can make surprise visits to observe the attendant and accurately assess the care provided to a client.

### PERSONNEL SPECIALISTS

At the initiation of service, clients are assigned to a Project OHR Personnel Specialist. The Personnel Specialist is the Project OHR staff member responsible for case coordination. It is in the client's best interest to seek to establish a close working relationship with his/her Personnel Specialist in order to ensure continuity of care. The Personnel Specialist will maintain an on-going telephone contact with the client as well as conduct periodic home visits to assure quality care. Like the nurse, the Personnel Specialist is not required to notify the client prior to making a visit. If a client should have any problems regarding home attendant care, he/she should contact the Personnel Specialist at **212-497-5053**.

### PLACEMENT DEPARTMENT

Project OHR maintains a staff of Placement Coordinators whose sole job function is to secure and place home attendant personnel for both permanent and temporary assignments. Clients requiring changes or temporary replacements should not contact OHR's Placement Coordinators, and should contact their assigned Personnel Specialist. The Personnel Specialist will instruct the Placement Coordinators as to the client's limitations and needs so as to secure the most appropriate placement.

### ON-CALL STAFF

During business hours, there is a Personnel Specialist and a Nursing Care Coordinator designated to be "on-call" each day. If a client has a specific problem that cannot wait until the assigned Personnel Specialist or Nursing Care Coordinator returns to the office, he/she may ask Project OHR's receptionist to connect him/her to the staff member designated to be on-call to provide assistance.

During non-business hours, on-call staff is available twenty four hours a day, seven days a week. If an emergency arises after business hours, call the office number and an answering service will take your message. On-call personnel will

return your call shortly. **In the event of a medical emergency, call 911 immediately.** Then call the office to report a serious problem, when the situation permits.

#### GIFT POLICY

Project OHR maintains a strict policy of **not** permitting its administrative staff to accept gifts of money, merchandise and/or free services from clients or client family members. Clients and their families are urged to comply with this policy.

#### AUTOMATED TIME AND LEAVE SYSTEM

In order for home attendants to be paid, each home attendant employee is required to use the assigned client's telephone to "clock in and clock out."

All Project OHR home attendant employees must call an "800" number, which is free of charge to the client, and enter an employee code into a telephone linked computer. This employee code informs the computer who is calling, where they are calling from and the time at which they are calling. The "clock-in" call takes less than one minute at the start and end of each shift. If a home attendant fails to call in or out he/she will be unable to get paid.

Clients, or any other individuals, are strictly forbidden from interfering in the way in which a home attendant clocks in and out. As attendants are paid for only the time they are with their assigned clients, clients must not require attendants to perform errands on their way to work or to leave early and perform an errand on the way home. Attendants are required to clock in and then commence their client responsibilities.

Clients who interfere with home attendant payroll in a fraudulent or collusive manner will be reported to HRA's Medicaid Fraud Division.

#### MEDICAID FRAUD

Monies received by Project OHR for home attendant care are government funds. Clients or client family members knowingly commit Medicaid fraud when they:

- a) interfere in any way with the Automated Time and Leave System and home attendant wages.
- b) permit the home attendant to work outside the client's home (e.g. hospital or vacation home.)
- c) refer a relative to act as a client's home attendant.
- d) request that the home attendant give a portion of the attendant's wages to the client.
- e) offer money, gifts, or free services to any Project OHR staff member.

- f) request that the home attendant work un-authorized hours.

Clients or home attendants who knowingly commit Medicaid fraud will be referred to HRA's Medicaid Fraud Division for investigation and legal action.

#### HOME ATTENDANT MEALS

Clients are not responsible to provide their assigned home attendants with meals during the work day. Home attendants should bring food from their own homes or, if they have a duty free hour, purchase food outside of the client's home during that time. If a client observes religious dietary laws, Project OHR expects that the client and attendant will establish a suitable arrangement for the accommodation of the religious standards of the client as well as the needs of the attendant.

#### CLIENT TRANSPORTATION

Home attendant employees are **not permitted** to use either their own personal automobile or a client's vehicle for the purpose of performing client errands. Additionally, under no circumstances may home attendant employees use either their own automobile or a client's personal vehicle to transport client or to be a passenger in a client's vehicle.

Home attendants may escort clients to doctor/clinic appointments in an ambulette.

#### CLIENT BANKING

Clients should not expect or depend on the home attendant to conduct their personal banking needs. In the event that a client becomes either physically or mentally incapable of performing personal banking, it will be the responsibility of the client's family to perform these tasks. In the event that the client does not have family able to manage the finances, Project OHR will refer the case to HRA's Protective Services for Adults (PSA).

#### HOME ATTENDANT EMPLOYEE VACATIONS AND HOLIDAYS

Home attendant vacation leave must be approved in advance by the Personnel Specialist. Whenever possible, Project OHR's Personnel Specialist will contact the client with the name of the replacement attendant.

Project OHR's home attendants receive seven paid holidays per year:

New Years Day	Labor Day	Independence Day
Martin Luther King Day	Thanksgiving	
Memorial Day	Christmas	

The client's regularly assigned home attendant is scheduled to work on these holidays. If the attendant decides not to work, it is the responsibility of OHR's Personnel Specialist to ensure that our Placement Department Coordinators secure an appropriate replacement.

It would be extremely helpful to Project OHR if family members could be with their relatives on Thanksgiving, Christmas and New Year's Day in order to permit home attendants to be with their families. Home attendants who work on these holidays will receive regular pay plus holiday pay.

#### IF YOU SHOULD HAVE A PROBLEM

Most of the questions and/or problems concerning the delivery of attendant care should be adequately handled by the assigned Personnel Specialist. However, if a client feels that the Personnel Specialist has not adequately answered his or her questions, he/she may wish to speak to the Supervising Personnel Specialist.

If a problem or complaint still persists, and a client wishes to discuss it further, he/she may ask to speak to the Associate Director. If still unresolved, the client may speak to the Executive Director.

Associate Director: Rachel Klein extension 337

Executive Director: D'vorah Kohn extension 345

Project OHR administration will investigate all complaints fully. All written complaints shall receive a response in writing within fifteen business days. Oral complaints may receive a written response, by request, within fifteen business days.

The New York City Human Resources Administration maintains a special unit to handle complaints that have not been resolved by the contracted vendor agency. If you should have a complaint regarding care provided by Project OHR and have not been able to resolve it with our staff, you may contact HRA's **Complaint Tracking Unit at (212) 896-5755.**

Alternately, you may report a problem to the New York State **Department of Health at (212) 417-5888.**

### OFFICE HOURS

Project OHR's administrative office is located at **80 Maiden Lane, New York City**. The # 2, 3, 4, 5 trains as well as the A and C trains all stop within walking distance of our offices.

The office hours are:

Monday through Thursday:	9 AM – 5 PM
Friday:	9 AM – 2 PM winter
	9 AM – 3 PM summer

Project OHR is closed on all major Jewish Holidays and many legal holidays.

**Project OHR staff look forward to providing quality care to you at all times. Please call your Personnel Specialist to discuss any concerns you may have.**

**PROJECT OHR, INC.**  
**80 Maiden Lane – 10<sup>th</sup> Floor**  
**New York, New York 10038**  
**(212) 497 – 5053**

## **CLIENT HANDBOOK**

\*\*\*\*\*

If you have any questions or problems regarding home attendant care, please contact your Personnel Specialist during business hours at (212) 497 – 5053.

When the office is closed, Project OHR has an answering service to take your calls and respond to emergencies. Please call the same number, (212) 497 – 5053 for emergencies.

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Project OHR has been selected by the Human Resources Administration of the City of New York to provide you with Home Attendant Care. Incorporated in November of 1979, Project OHR seeks to provide reliable, high quality home attendant care. Project OHR clients: a) are Medicaid eligible, b) reside in Brooklyn, and c) require assistance with the activities of daily living.

The primary goal of our service is to permit the elderly and/or disabled to remain independent in their home environment, preventing whenever possible, unnecessary and costly institutionalization.

This handbook has been developed to familiarize you with:

- a) our company's policies and procedures
- b) your responsibilities as a Project OHR client and
- c) the duties of the home attendant assigned to assist you.

Please read this CLIENT HANDBOOK carefully and save it for reference.

For home care to be successful, all participants in the process: client, family, agency and attendant, must come together in a spirit of openness and cooperation. Through open communications between parties, Project OHR is able to provide the appropriate level of care to the elderly and/or disabled client.

If you have any questions regarding this handbook, please feel free to contact your Personnel Specialist.

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D'vorah Kohn  
Executive Director

This program is funded under an agreement with the  
Human Resources Administration of The City of New York

## BACKGROUND INFORMATION

Project OHR is a not-for-profit home attendant vendor agency under contract with the Human Resources Administration (HRA) of the City of New York – Home Care Services Program (HCSP). All funds for home attendant care are received through the Medicaid program. There are over 60 vendor agencies providing home attendant services to the elderly, frail and disabled populations throughout the five boroughs of New York City.

## MEDICAID ELIGIBILITY

Prior to commencement of home care, Project OHR clients are approved for participation in the Medicaid program by local CASA (Community Alternative Systems Agency) offices, the division of HRA that certifies individuals for participation in the Medicaid program. Not all Medicaid clients receive home care. Project OHR clients have been approved for both Medicaid and for home attendant services.

All of Project OHR's clients must maintain Medicaid eligibility in order to continue to receive home attendant care. If coverage lapses, or a client is found to be no longer eligible, CASA will instruct OHR to terminate services. Therefore, IT IS EXTREMELY IMPORTANT THAT ALL CLIENTS PROMPTLY SUBMIT APPROPRIATE DOCUMENTATION TO THE CASA OFFICE OR CASE WORKER AT THE TIME OF MEDICAID RECERTIFICATION.

Any questions regarding Medicaid should be addressed to the client's CASA Case Manager.

## SERVICE AUTHORIZATION

Prior to case referral to Project OHR, clients have been visited and assessed by a CASA case worker and visiting nurse. The CASA staff is responsible for a) initial and ongoing determination of Medicaid eligibility and b) authorization of service hours.

Project OHR's Nursing Care Coordinators can suggest changes in service plans. However, it is the responsibility of the CASA staff to determine and authorize client service hours.

## INITIATION OF HOME ATTENDANT SERVICE

Prior to the actual start of service, Project OHR has received a formal referral from the CASA office. This referral includes: a) total hours and days of service,

b) length of time for which service has been authorized, c) summary of client's physical condition, medical diagnosis and history, and d) surplus income, if applicable. When OHR staff receives the referral from the CASA office, contact is made with the prospective client to arrange for an initial assessment visit.

A Project OHR Nursing Care Coordinator and Personnel Specialist visit each client in his/her home. They complete an independent assessment of client need for home care and whether home care service is appropriate for the client. Our assessment team will ask questions regarding condition, need for assistance, medication, family supports, etc. All of this information is crucial to our agency's ability to provide care.

The Project OHR staff will inform the prospective client of the hours and days of service that CASA has authorized, explain the duties and functions of an attendant and attempt to address any concerns and questions clients have regarding our service.

#### CLIENT REFERRAL OF CARE PROVIDERS

With few exceptions, Project OHR will secure and place a qualified home attendant from over 1600 attendants we employ. In the rare situation where OHR will hire a client-referred attendant, the hiring process will take several weeks. This will delay the start of service. Project OHR will, therefore, start service with a different home attendant, pending the hiring of the attendant referred by the client. Home attendants referred to Project OHR must meet our selection criteria and we retain the right, as employer, to disqualify those potential employees we deem unfit or inappropriate for employment.

Project OHR will only hire attendants referred by clients with specific needs, i.e. language, job skills, etc. If Project OHR already employs home attendants who are able to care for the client, we will not register or process a client referred attendant.

IT IS EXTREMELY IMPORTANT THAT HOME CARE SERVICES BEGIN WITHIN 30 DAYS OF THE REFERRAL BY THE CASA OFFICE. ALL MEDICAL DOCUMENTATION EXPIRES AFTER THAT PERIOD AND A CLIENT MAY HAVE TO RE-APPLY FOR SERVICES AFTER THE 30 DAYS ELAPSE.

#### DISAGREEMENT OVER SERVICE SCHEDULES

If a client disagrees with the number of hours of home care service as authorized by CASA, the client must apply to the Human Resources Administration for a fair hearing.

It is the recommendation of Project OHR staff to commence service with less hours and request a re-assessment from the CASA staff, unless less hours would place the client at serious physical risk.

### SURPLUS INCOME

Some clients, by virtue of income and resources (savings, etc.) do not completely meet the eligibility standards for Medicaid. However, because of the need for home care and/or high medical costs, they are eligible for services through the SURPLUS INCOME PROGRAM. Under this program, individuals can obtain Medicaid services by paying the amount of their monthly income above the Medicaid maximum limit toward that service, thereby making themselves eligible for Medicaid.

The amount of surplus income is determined at the time of the application for Medicaid eligibility. As part of the notification process, clients are informed in writing of the exact amount of the monthly surplus obligation. If a client disagrees with that amount, he/she has the right to contest the determination through a fair hearing process, detailed in the Medicaid Letter of Acceptance.

At the time of client referral for home attendant care, the CASA staff has already informed Project OHR staff of the amount of the monthly surplus obligation.

**PROJECT OHR DOES NOT DETERMINE A CLIENT'S SURPLUS AMOUNT. HOWEVER, WE ARE REQUIRED BY CONTRACT WITH HRA TO COLLECT IT FROM THOSE CLIENTS WHO OWE IT.**

Payment of monthly surplus income to Project OHR is not designated solely for home attendant services, but maintains client eligibility for all Medicaid services. Clients are obligated to pay the monthly surplus even if, for some reason, they have not had the usual number of home attendant visits during a particular month due to client hospitalization, vacation, etc.

Project OHR will mail out monthly bills to our Surplus Income clients at the beginning of each month for the up coming month. The bill will list the current amount owed plus any arrearages from past months. Payment is due upon receipt of the bill and must be made by personal check or money order. Cash payments are not accepted. The monthly payment should be returned by mail in the pre-stamped envelope provided by Project OHR.

**PRIOR TO COMMENCEMENT OF HOME ATTENDANT CARE, PROJECT OHR WILL REQUIRE THAT A CLIENT OR NEXT-OF-KIN SIGN A CONTRACTUAL AGREEMENT OBLIGATING HIM/HER TO PAY MONTHLY SURPLUS INCOME.**

**FAILURE TO PAY SURPLUS MAY RESULT IN DISCONTINUATION OF CLIENT PARTICIPATION IN THE MEDICAID PROGRAM.**

## CLIENT CARE PLAN

During the initial visit to a client's home, a Project OHR Nursing Care Coordinator drafts a "CLIENT CARE PLAN". The Care Plan details a client's physical limitations and the type of routine personal assistance required. The Care Plan has three copies, one of which is placed in an accessible place in the client's home. In this way, both the client and all future home attendants can refer to it. The two other copies are filed in the client's chart at Project OHR and its contents are shared with permanently placed home attendants prior to the start of the assignment.

The Project OHR Nursing Care Coordinator will update this Care Plan bi-yearly, or more often if indicated by any change in client condition.

## PROVISION OF SERVICE AND TEMPORARY SUSPENSIONS

According to the Human Resources Administration regulations, Project OHR can provide home attendant care to a client **only** in his/her official place of residence.

If a client leaves his/her home for twenty four hours or more, the client and/or client next-of-kin are required to notify Project OHR immediately and service will be temporarily suspended.

Service will be temporarily suspended when the client is at any one of the following locations:

1. outside of a client's home (including a relative's home)
2. summer or vacation home
3. hospital, nursing home or rehabilitation center

It is the responsibility of the client and/or the client's family to notify Project OHR's Personnel Specialist if any of the above situations occur. Clients should not leave this responsibility to the assigned home attendant.

To reinstate service after a temporary suspension, up to a maximum of thirty days, the client is responsible to contact his/her assigned Personnel Specialist. The Personnel Specialist will then inform the attendant to return to work.

IF A CLIENT MAKES ARRANGEMENTS WITH HIS/HER FORMERLY ASSIGNED HOME ATTENDANT TO RETURN TO WORK WITHOUT INFORMING PROJECT OHR AFTER SERVICE HAS BEEN SUSPENDED, THE CLIENT WILL BE RESPONSIBLE FOR PAYMENT OF WAGES TO THE HOME ATTENDANT. PROJECT OHR WILL BE UNABLE TO PAY THE HOME ATTENDANT AS SERVICE WAS OFFICIALLY SUSPENDED.



at 8 or 9 am for morning service, or 1 or 2 pm for afternoon service. In order to permit attendants to work a full day, clients receiving low hours of care per day may be required to accept service in the afternoon.

### HOME ATTENDANT JOB RESPONSIBILITIES

Home attendant duties are divided into two categories:

**Personal Care Services** include assisting a client with walking, bathing, dressing, personal grooming, meal preparation, feeding and toileting.

**Housekeeping chores** include tasks that involve keeping a client's household clean, safe and sanitary, as well as shopping, errands, escort and personal laundry.

Clients are responsible for showing home attendants where housekeeping supplies are stored, and how to use them.

Problems often arise regarding the extent of housekeeping chores to be performed by the home attendant. Home attendant care has been authorized based on the primary need for personal care services as detailed above. Home attendants are neither required nor permitted to perform heavy duty cleaning tasks such as: a) washing windows or blinds, b) moving furniture, c) waxing floors. Additionally, attendants are not required to do laundry by hand.

HRA has set defined limits as to the number of hours a home attendant may dedicate to housekeeping chores. Additionally, HRA has set limits to the amount of time an attendant may spend ambulating with his/her client outside the home.

**Clients whose needs primarily appear to be of a housekeeping nature will be referred to CASA for transfer to one of HRA's housekeeping vendor agencies.**

### STANDARD PRECAUTIONS

The Occupational Safety and Health Administration (OSHA), a federal agency, has determined that home attendants must use standard precautions when caring for all clients. Standard precautions requires home attendants to treat all blood and body fluids as potentially infectious. Blood and body fluids must be handled with protective gear such as gloves, masks, or eye guards in case of splashing. Proper disposal of soiled linens and sharps is required.

As part of the pre-employment orientation and at every in-service training session, Project OHR's nursing staff will review standard precaution guidelines with home attendant employees.